

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>12/18/02</u>		2 Serial/Patent # <u>10/076,247</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
<input checked="" type="checkbox"/>	Petition	6	12/12/02	\$ 130.00							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ 130.00							
		8 TO BE REFUNDED BY:									
		Treasury Check									
		<input checked="" type="checkbox"/>	Credit Deposit A/C #:								
		9	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">3</td> <td style="width: 20px; text-align: center;">--</td> <td style="width: 20px; text-align: center;">3</td> <td style="width: 20px; text-align: center;">9</td> <td style="width: 20px; text-align: center;">7</td> <td style="width: 20px; text-align: center;">5</td> </tr> </table>		0	3	--	3	9	7	5
0	3	--	3	9	7	5					
10 REASON:											
	Overpayment										
	Duplicate Payment										
<input checked="" type="checkbox"/>	No Fee Due (Explanation):										
<u>Postcard shows app filed on day petitioners alleged it was filed 181 - no fee case</u>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>E. S. Miller</u>			TITLE: <u>Petitions Attorney</u>								
SIGNATURE: <u>E. S. Miller</u>			PHONE: <u>308-6712</u>								
OFFICE: <u>Office of Petitions</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>Alison Kelly</u>			DATE: <u>12/26/02</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: